

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	Not Yet Assigned
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	SYNTHETIC GENES
Attorney Docket Number::	300622010900
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	24
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Daniel
Middle Name::	V.
Family Name::	SANTI
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	211 Belgrave Avenue
City of mailing address::	San Francisco
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94117

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ralph  
Middle Name:: C.  
Family Name:: REID  
City of Residence:: San Rafael  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 600 Galerita Way  
City of mailing address:: San Rafael  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94903

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Sarah  
Middle Name:: J.  
Family Name:: KODUMAL  
City of Residence:: Oakland  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 3933 Harrison Street  
Apartment # 102  
City of mailing address:: Oakland  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94611

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Status:: Full Capacity  
Given Name:: Sebastian  
Family Name:: JAYARAJ  
City of Residence:: Berkeley  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 1709 Shattuck Avenue  
Apartment # 214  
City of mailing address:: Berkeley  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94709

**Correspondence Information**

Correspondence Customer Number:: 25226

**Representative Information**

Representative Customer Number:: 25226

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 USC 119(e)	60/414,085	09/26/02